

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 12/20/2007  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>344001</b>		(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED  <b>09/30/2005</b>	
NAME OF PROVIDER OR SUPPLIER  <b>DOROTHEA DIX HOSP</b>				STREET ADDRESS, CITY, STATE, ZIP CODE <b>820 S BOYLAN AVE RALEIGH, NC 27603</b>			
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B 000	INITIAL COMMENTS			B 000			
B 122	<p>An unannounced recertification survey was conducted by federal consulting surveyors from September 27, 2005, to September 30, 2005. The census at the time of this survey was 250 patients; the sample size was 17.</p> <p>482.61(c)(1)(iii) TREATMENT PLAN</p> <p>The written plan must include the specific treatment modalities utilized.</p> <p>This STANDARD is not met as evidenced by: Based on observations, staff interviews and record reviews, the hospital failed to:</p> <p>A. List all active interventions provided to 4 of 17 sample patients (A1, A3, B1 and B2) on the treatment plans. Treatment interventions listed on these patients' treatment schedules, and/or attended by them, were not included on their treatment plans. Consequently, there was no documentation to indicate the focus of these interventions based on the individual needs, disabilities or strengths identified for these patients.</p> <p>B. Develop individualized interventions for 7 of 17 sample patients (A1, A2, A3, B1, B2, D12 and D22). Instead, generic clinical responsibilities were listed as interventions.</p> <p>These deficiencies hindered staff's ability to provide and evaluate treatment based on the patients' presenting needs and behaviors.</p> <p>Findings are:</p> <p>A. Treatment Interventions not included on</p>			B 122			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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B 122	<p>Continued From page 1 patients ' treatment plans.</p> <p>Record Review:</p> <p>1. The treatment schedule for Patient A1, admitted 9/7/05, included " Substance Abuse Education, " " Socialization Through Music, " "  Discharge Planning " and " Community Resources. " These interventions were not included on this patient ' s treatment plan.</p> <p>2. The treatment schedule for Patient A3, admitted 9/12/05, included " Peer Bridges, " "  Living a Healthy Lifestyle " and " Focus Group II.  " These interventions were not included on this patient ' s treatment plan.</p> <p>3. The treatment schedule for Patient B1, admitted 9/17/05, included " Living a Healthy Lifestyle " and " Arts &amp; Crafts. " These interventions were not included on this patient ' s treatment plan.</p> <p>4. The treatment schedule for Patient B2, admitted 9/22/05, included " Understanding your Treatment, " " Interactive Socialization " and "  Socialization through Music. " These interventions were not included on this patient ' s treatment plan.</p> <p>Observations:</p> <p>1. During observations on 9/28/05, at 10:10 AM on the treatment mall, patient A1 attended a group entitled " Community Resources. " The staff conducting the group did not discuss any topic related to community resources but instead asked questions related to word associations and trivia knowledge such as who opened the first</p>	B 122			

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B 122	<p>Continued From page 2 department store.</p> <p>2. During observation on 9/28/05, at 11:05 AM on the treatment mall, Patient B1 attended a group entitled, " Living a Healthy Lifestyle. " The staff conducting the group discussed issues related to obesity and being overweight. These issues were not identified as problems for this patient.</p> <p>Staff Interviews:</p> <p>1. During interview on 9/28/05, at 10:45 AM on the treatment mall, Staff P indicated that she was not aware of patient A1 ' s treatment goals, problems or the focus of the intervention for this patient. Staff P also stated she was the backup for the group leader and was not aware of specific topics that had been developed for this group.</p> <p>2. During an interview on 9/28/05, at 11:48 AM, staff T reported she was not aware of Patient B1 ' s treatment goals or the focus of the treatment interventions for this patient.</p> <p>B. Generic clinical responsibilities documented as interventions.</p> <p>Record Review:</p> <p>1. Patient A1- Goal: " Patient will be able to verbalize adaptive coping mechanisms to use, instead of substance abuse, in response to stress. " Nursing Interventions: " Set limits on manipulative behaviors " and " Administer UDS [Urine Drug Screen] per physician order. "</p> <p>2. Patient A2 - Goal: " Patient will eliminate pattern of delusional thinking. " Nursing Interventions: " Convey acceptance of patient ' s</p>	B 122			

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B 122	<p>Continued From page 3</p> <p>need for false belief, " " Do not argue or deny the belief " and " Use same staff as much as possible ...Avoid physical contact. "</p> <p>3. Patient A3 - Goal: " Patient will eliminate pattern of delusional thinking. " Nursing Interventions: " Convey acceptance of patient ' s need for false belief, " " Do not argue or deny the belief " and " Use same staff as much as possible ...Avoid physical contact. "</p> <p>4. Patient B1- Goal: " Patient will not harm self or others. " The patient will verbalize anger rather than hit others. " Nursing Interventions: " Observe patient for escalation of anger, increased motor activity, " " Administer tranquilizing medication as ordered by physician " and " Consider moving to the High Management Unit to decrease stimuli. "</p> <p>5. Patient B2 - Goal: " Patient will eliminate pattern of delusional thinking. " Nursing Interventions: " Convey acceptance of patient ' s need for false belief, " " Do not argue or deny the belief, " " Use same staff as much as possible " and " Avoid physical contact. "</p> <p>6. Patient D12 - Problem Statement: " Patient verbalizes delusional thinking; confusion which interferes with his participation in treatment. " MD Intervention: " Monitor meds/labs. "</p> <p>7. Patient D22 - Problem Statement: " Grandiose, hyperactive, labile, intrusive, decreased sleep, recent physical aggression. " Nursing Intervention: " Monitor for med side effects. "</p>			B 122			
B 125	482.61(c)(2) TREATMENT PLAN			B 125			

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B 125	<p>Continued From page 4</p> <p>The treatment received by the patient must be documented in such a way to assure that all active therapeutic efforts are included.</p> <p>This STANDARD is not met as evidenced by: Based on observations, staff interviews and record review, the hospital failed to:</p> <p>I. Provide active treatment measures for 3 of 17 sample patients (A1, A2 and A3) and non-sample patients on Unit 1 North who could not attend treatment at the facilities treatment mall. This resulted in the potential for these patients not to achieve optimal functioning and to be discharged in a timely manner.</p> <p>II. Provide a sufficient intensity of interpreter services for 1 of 1 patients in the sample (B1), who spoke limited English. As a result, this patient was not able to benefit from all of the treatment interventions scheduled that require an understanding of the English language, thereby, potentially delaying the patient 's discharge.</p> <p>Findings are:</p> <p>I. Lack of Active Treatment.</p> <p>A. Lack of treatment for sample Patients A1, A2 and A3.</p> <p>Observations:</p> <p>On 9/27/05, the following patients were observed in, or near, the unit dining room where nursing staff was conducting bingo, coloring, and nail care activities on 1 North from 10:05 AM to 11:20 AM:</p>	B 125			

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B 125	<p>Continued From page 5</p> <p>1. Patient A1 was a 25-year-old female admitted 9/7/05; her activity schedule indicated a " Substance Abuse Education " activity in the treatment mall from 10:00 - 10:45 AM.</p> <p>2. Patient A2 was a 49-year-old female admitted on 9/1/05. There was no activity schedule found in this patient ' s chart.</p> <p>3. Patient A3 was a 48-year-old female admitted on 9/12/05. She was observed sleeping on a chair outside the dining room until 11:00 AM. This patient was scheduled to attend a " Peer Bridges " activity on the treatment mall, which was scheduled from 11:00 AM to 1:45 PM.</p> <p>Staff Interviews:</p> <p>1. During interview on 9/27/05 at 11:25 AM, the surveyor inquired about the treatment schedules for sample patients A1, A2 and A3. Staff DD indicated that these patients, along with other non-sample patients, were to attend activities held in the dining room. Staff DD stated that nursing was responsible for conducting activities since the staff person responsible was on leave. Activities being conducted were bingo, coloring and nail care. When the surveyor showed staff DD the unit schedule, which listed, " Self Awareness, " scheduled at 11:15 AM, Staff DD indicated having no knowledge of this activity being scheduled for that time period.</p> <p>2. During interview on 9/29/05 at 10 AM, the Director of Nursing acknowledged that the on-unit schedule for 1 North was not tied to the individual treatment goals in the treatment plan but is " a milieu program. "</p>	B 125			

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B 125	<p>Continued From page 6</p> <p>Record Review:</p> <p>There was no documentation in the records to show the active treatment measures being performed for patients A1, A2 and A3. The treatment plans for these patients were not revised to reflect treatment measures or alternative treatment measures when they did not participate in scheduled treatment activities.</p> <p>1. For Patient A1 admitted on 9/7/05, there was no documentation of her participation in activities as scheduled. These activities included: " Substance Abuse Education, " " Socialization through Music " and " Discharge Planning. " As of 9/27/05, there was no revised treatment plan or treatment schedule to reflect this patient ' s level of functioning.</p> <p>2. For Patient A2, admitted on 9/1/05, there were no documented active treatment measures listed to address the reasons for her hospitalization-withdrawal into self, extreme suspiciousness of others and suicidal ideations.</p> <p>3. For Patient A3, admitted on 9/12/05, there was no documentation of her participation in activities as scheduled. These activities included: " Peer Bridges, " " Living a Healthy Lifestyle " and " Focus Group II. " This patient was to attend the " Peer Bridges " session held on the Treatment Mall. The progress notes indicated, " Pt unable to tolerate PSR groups [PSR = Psychosocial Rehabilitation]. As of 9/27/05, there was no revised treatment plan or treatment schedule to reflect this patient ' s level of functioning.</p> <p>Policy Review:</p>	B 125			

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B 125	<p>Continued From page 7</p> <p>A review of the hospital standards of Clinical Practice Manual: Patient Management Standard revealed that the hospital failed to follow its own standards, which stipulates, " After the second treatment plan review, the continued care treatment plan should be initiated. " The continued care treatment plans were not found in the record for Patients A1 (second treatment review 9/22/05) and A2 (second treatment review 9/21/05).</p> <p>B. Lack of treatment for non-sample patients on Unit 1 North.</p> <p>Observations:</p> <p>Observations on 9/27/05, from 10:00 AM to 12:00 noon, and on 9/28/05, from 1:30 PM to 5:00 PM, on Unit 1 North, revealed that: 1) only 15 of the 36 patients attended the treatment mall on 9/27/05 and; 2) approximately 20 of the 36 patients attended the treatment mall on 9/28/05. On 9/27/05, the surveyor observed 12 patients who were sitting idly watching TV or sleeping with no therapeutic activity of any kind being conducted. Similar behavior was observed on 9/28/05.</p> <p>Staff Interviews:</p> <p>1. In an interview conducted on 9/28/05 at 4:30 PM with the Director of Rehabilitation, Treatment Mall Director and the Nursing Coordinator of the Treatment Mall regarding the " Alternative Programming " for unit-based therapy the following information was elicited:</p> <p>For those patients who cannot or will not attend the mall, " Alternative programming " has been</p>	B 125			



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B 125	<p>Continued From page 8</p> <p>developed. Select nursing staff have been trained in " remediation " and provide four groups on the unit 1 North as follows:</p> <p>10:15-10:45 AM - Process/goals group 11:00-11:45 AM - Current events discussion 1:15-2:00 PM - Remotivation 2:15-3:00 PM - Remotivation</p> <p>2. In follow-up interview with the Director of Rehabilitation and Nursing Coordinator of the Treatment Mall on 9/29/05 at 3:00 PM, surveyors discussed the fact that observations noted above indicated that this unit ' s Alternative Programming was not being implemented and that unit-bound patients were not receiving active therapeutic treatment.</p> <p>II. Lack of Interpreter Services.</p> <p>Patient B1 was a 32 year old Spanish-speaking male who spoke limited English. Admitted on 9/17/05, he was not provided interpreter services in a sufficient intensity to conduct timely assessment and provide treatment interventions as scheduled.</p> <p>1. During an observation on 9/27/05 at 3:50 PM, Staff S was observed completing a nursing assessment of Patient B1 in the dayroom with the assistance of Staff DD who was serving as an interpreter. This nursing assessment should have been completed prior to the development of the treatment plan on 9/20/05.</p> <p>2. During an interview on 9/27/05 at 4:20 PM, Staff S stated she was completing the nursing assessment late because it " had been hard to get information because he doesn ' t speak much</p>	B 125			

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B 125	<p>Continued From page 9</p> <p>English. " Staff S also indicated that the nursing assessment was usually completed on the Crisis Stabilization Unit before a patient is transferred to 2 North.</p> <p>3. During an observation on 9/28/05 at 11:05 AM, in the treatment mall, Patient B1 attended a group entitled, " Living a Healthy Lifestyle. " There was no interpreter provided for this session, which was entirely didactic. The patient left the group session at 11:15 AM.</p> <p>4. During an interview on 9/29/05 at 11:15 AM, the Clinical Director indicated certified interpreters are obtained for clinical assessments and for discharge planning, and hospital staff who are not certified interpreters, are permitted to provide interpreter services for other needs.</p> <p>5. Based on a review of B1 ' s records, there was no documentation of interpreter services being provided until 9/20/05 (three days after admission) during the treatment plan review meeting. The treatment plan was not developed to reflect the need for interpreter services.</p>	B 125			